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## \*BIBDATASHEET\*

CONFIRMATION NO. 2440

Bib Data Sheet

<b>SERIAL NUMBER</b> 10/027,400	<b>FILING OR 371(c) DATE</b> 12/19/2001 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1647	<b>ATTORNEY DOCKET NO.</b> 02307K-026726US
<b>APPLICANTS</b> Lewis Thomas Williams, Tiburon, CA; Jaime A. Escobedo, San Francisco, CA;				
<b>** CONTINUING DATA *****</b> This application is a CON of 08/461,917 06/05/1995 PAT 6,372,438 which is a CON of 08/226,243 04/11/1994 ABN which is a CON of 07/650,794 01/31/1991 ABN which is a CIP of 07/309,322 02/10/1989 ABN which is a CIP of 07/151,414 02/02/1988 ABN				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 01/30/2002</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 36
Examiner's Signature _____ Initials _____		<b>INDEPENDENT CLAIMS</b> 15		
<b>ADDRESS</b> 20350				
<b>TITLE</b> HUMAN PLATELET-DERIVED GROWTH FACTOR RECEPTORS				
<b>FILING FEE RECEIVED</b> 1318	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	